

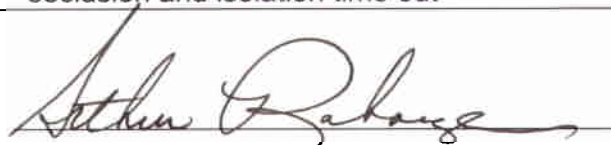
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**DIVISION OF MENTAL HEALTH, DEVELOPMENTAL DISABILITIES AND SUBSTANCE  
ABUSE SERVICES  
POLICIES AND PROCEDURES**

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<b>Section:</b>	Communications & Training	<b>Effective Date:</b>	Upon signature
<b>Branch:</b>		<b>Policy No.</b>	CT-102
<b>Subject:</b>	Training requirements for a) alternatives to and b) the use of physical restraint, seclusion and isolation time out	<b>Revision Date:</b>	

**Approved By:**



Division Director

**Approval Date:** 2/5/01

**Purpose:**

Implementation of NC Administrative Code 10 14G, J, P-R; known as portions of Client Rights and Human Rights Rules respectively.

**Scope:**

State facilities, area programs and other service providers funded through and/or licensed according to Chapter 122-C and 131E statutes must comply with this policy. Failure to comply is a violation of state law.

**Policy Statement:**

Everything possible must be done to prevent the need for the use of physical restraints, seclusion and isolation time out with people with mental illness, developmental disabilities, substance abuse who are receiving services. Providers of services must follow policies and procedures and training that promote this concept. Physical restraint, seclusion and isolation time out shall only be used as a last resort, employing the least restrictive procedures and in the safest manner possible.

**Enforcement:**

Monitoring of compliance with this policy and applying sanctions shall be the responsibility of the Division of Mental Health, Developmental Disabilities and Substance Abuse Services (DMH/DD/SAS) and the Division of Facility Services

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**Procedure:**

**Responsibility:**

**Action:**

**Service Provider**

Service providers already in business as of January 1, 2001, shall have a written plan for training in place by April 15, 2001 that is in compliance with HB 1520; temporary mental health, developmental disabilities and substance abuse Administrative Rules and this policy. The plan must include a time line for training all appropriate staff. Service providers beginning business after January 1, 2001, shall comply upon beginning to provide services.

**Service Provider**

Everyone providing services to consumers (such as service providers, employees, students, volunteers) may not be alone with the client until trained as described in methods of preventing and alternatives to use of physical restraint/seclusion/isolation time out. All must be trained within 30 days of beginning to provide services.

People providing direct care to people with disabilities may not be alone with the client, and may not be privileged to use physical restraint/seclusion/isolation time out until they have demonstrated competence by successfully completing training as required.

**Service Provider**

Service providers shall implement written policies and practices that::

- emphasize the use of alternatives to physical restraint, seclusion and isolation time out,
- require demonstrated competence as outlined in Rules for prevention/alternatives and for use of these interventions
- require trainer and coach qualifications as outlined in Rules
- require documentation as outline in Rules

**Service Provider**

Training must be competency-based. That is, it must include measurable learning objectives, appropriate and measurable testing (written and by observation of behavior) on those objectives, and measurable methods to determine passing or failing the course.

1. *Acceptable training programs for prevention/alternatives will include, but are not limited to, appropriate presentation of:*

- knowledge and understanding of the people being served,
- recognizing and interpreting human behavior
- recognizing the effect of internal and external stressors that may affect) people with disabilities,
- strategies for building positive relationships with persons with disabilities, recognizing environmental and organizational factors that may affect people with disabilities,
- recognizing the importance of and assisting in the person's involvement in

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**Responsibility:**

**Action:**

(continued)

- making decisions about his/her life,
  - skills in assessing individual risk for escalating behavior,
  - client rights as defined in NC state laws and rules,
  - communication strategies for defusing and de-escalating potentially dangerous behavior, and
  - positive behavioral supports (providing means for people with disabilities to choose activities which directly oppose or replace behaviors which are unsafe).
2. *Acceptable training programs on use of physical restraint/seclusion/isolation time out will include, but are not limited to, appropriate presentation of:*
- Information on alternatives to the use of physical restraint and seclusion and isolation time out,
  - guidelines on when to intervene (understanding imminent danger to self and others),
  - emphasis on safety and respect for the rights and dignity of all persons involved (using concepts of least restrictive interventions and incremental steps in an intervention),
  - strategies for the safe implementation of physical restraint and seclusion and isolation time out,
  - health status checks before, during and after use of physical restraint and seclusion and isolation time out, including but not limited to, monitoring vital indicators, physical and psychological status and comfort and when to seek medical assistance.
  - prohibited procedures,
  - debriefing strategies, including their importance and purpose,
  - documentation methods/procedures

Service providers may develop their own curricula or use existing ones.

Formal refresher training must be completed by each service provider at minimum annually and more frequently as required by agency policy or as required by staff plan.

Content of the training that the service provider wishes to employ must be approved by the Division of MH/DD/SAS.

**Service Provider**

Service providers must maintain documentation of initial and refresher training for 3 years.

Documentation shall include:

- class roster showing who participated in the training and the outcomes (pass/fail),
- when and where they attended, and
- instructor's name.

The Division of MH/DD/SAS may review/request this documentation at any time

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**DIVISION OF MENTAL HEALTH, DEVELOPMENTAL DISABILITIES AND SUBSTANCE  
ABUSE SERVICES  
POLICIES AND PROCEDURES**

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**Responsibility:**

**Action:**

**Service Provider**

After January, 2001, service providers must apply in writing to the Division of Mental Health, Developmental Disabilities and Substance Abuse Services, Communications and Training Section, 3022 Mail Services Center, Raleigh, NC 27699-3022, for approval of their proposed training program.

If service providers are applying to use a program *not* already approved, they must provide a written description of the program including all the elements described in the Administrative Rules and this policy.

If service providers are applying to use a program *already approved*, they must send a letter to the address noted above stating that intention.

**Division of Mental  
Health, Developmental  
Disabilities and  
Substance Abuse  
Services**

A standing committee shall be appointed by the Communication and Training Section Chief to review and approve training (instructor and participant) programs. The Committee shall be composed of:

- Chair – Communication and Training Section Chief or designee
- 2 consumers
- 1-2 members from consumer advocacy groups not providing services
- Division staff member representing developmental disability services
- Division staff member representing adult mental health services
- Division staff member representing children's services
- Division staff member representing substance abuse services
- Division staff member representing hospital services
- 3 service providers

One-third of the members shall rotate off the committee every two years.

The Committee shall meet quarterly if there are programs to review.

Service providers wishing to make changes to their curriculum before the next Committee meeting may do so on only an interim basis with approval (*continued*) of their Client/Human Rights committee and management.

The Committee shall review training program documentation as received, provide a written response within 90 days and maintain an up-to-date list of approved programs.

**Service Provider**

**Qualifications of Trainers/Instructors:**

- Demonstrated competence by 100% correct on testing in training program aimed at preventing, reducing, and eliminating the need for restrictive interventions. (for prevention training)
- Demonstrated competence by 100% correct on testing in training program on the use of restraints/seclusion/isolation timeout. (for training in the use of these interventions)
- Demonstrated competence by passing grade on testing in instructor training

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**DIVISION OF MENTAL HEALTH, DEVELOPMENTAL DISABILITIES AND SUBSTANCE  
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**Responsibility:**

**Action:**

(continued)

- program.
- Coached experience teaching the training program used.
- Successfully teaching the course at least once annually.
- Successful completion of refresher instructor training at least every two years.

**Service Provider**

Instructor training must be competency-based. That is, it must include measurable learning objectives, appropriate and measurable testing (written and by observation of behavior) on those objectives, and measurable methods to determine passing or failing the course.

Acceptable instructor training programs will include but are not limited to appropriate presentation of:

- understanding the adult learner,
- methods for teaching content of the course,
- methods for evaluating trainee performance,
- documentation procedures

**Service Provider**

Qualifications of Coaches:

- Meets all preparation requirements as a trainer
- Experience includes at least 3 times teaching the course for which
- coaching.
- Demonstrated competence at coaching by successful completion of coaching or train-the-trainer instruction.

The same documentation of preparation as for trainers.

**Service Provider**

Providers must maintain documentation of initial and refresher instructor and coach training for 3 years.

Documentation shall include:

- Who participated in the training and the outcomes (pass/fail)
- When and where they attended
- Instructor's name

The Division of MH/DD/SAS may review request this documentation at any time.